

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>	<i>pw</i>	<i>32</i>	<i>12/12</i>
<b>FORMALITY REVIEW</b>	<i>CP</i>	<i>11/10</i>	<i>2/3/10</i>
<b>RESPONSE FORMALITY REVIEW</b>			

NOT AVAILABLE COPY

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here